FRACTURES AND JOINT INJURIES, Vol. 2. By Sir Reginald Watson-Jones, B.Sc., M.Ch.Orth., F.R.C.S., F.R.A.C.S.(Hon.), F.A.C.S.(Hon.). Fourth Edition. (Pp. viii + 445-1073; figs. 710-1613. 120s. per set.) Edinburgh: E. & S. Livingstone, 1955.

The second volume of the fourth edition for which we have waited so long has now been published. Many parts of this volume have been rewritten and there has been added a great number of new diagrams, sketches, and X-ray photographs. Indeed, there are 904 of these in the book and each, without exception, has an important bearing on the subjects under discussion.

The clearness of thought and completeness of expression of the author, which runs throughout the entire book, is no better exemplified than in the pages on Colles fracture. This common and important fracture is dealt with completely and clearly in seven pages and its description is an example for all, who would write, to follow.

The chapter on fractures of the spine includes an appreciation of the difference between stable and instable fractures, and it is clearly pointed out the types of case which should and must be immobilised and those which require no immobilisation. In this connection, the author rightly and strongly stresses the necessity for first-class radiological technique in dealing with spinal injuries. This should be noted by all orthopædic surgeons, especially by those who, through no fault of their own, have to put up with incomplete X-ray examination of their spinal cases.

The article on fracture dislocations of the spine with paraplegia has been completely rewritten in view of the recent work of F. W. Holdsworth, and this chapter is an extremely useful addition to the book.

The entire volume is delightfully written and the style is well up to the tremendously high standard which Sir Reginald has always set himself.

It is certain that this volume will find an important place in the library of all hospitals dealing with bone and joint injury and of all surgeons engaged in the treatment of bone and joint injury.

R. I. W. W.

SURGERY OF THE HEART AND THORACIC BLOOD VESSELS. Edited by N. R. Barrett, being Volume 11, No. 3, of British Medical Bulletin. (Pp. 171-242.) London: British Council, 1955.

THE British Medical Bulletin which deals with the Surgery of the Heart and Thoracic Blood Vessels has been received. It is very timely.

During the past seven years the progress of cardiac surgery has been so rapid that it has been difficult to follow and appraise all the new developments. This Bulletin summarises these, and does it well

It includes articles on anæsthesia for cardiac surgery, selection of patients for surgery in acquired heart disease, hypothermia, and on the artificial heart-lung. There are articles on all the cardiac conditions, which are at present amendable to surgery, or are likely to become so.

Such names as Brock, Paul Wood, Maurice Campbell, and Tubbs are just a few of the list of distinguished contributors.

There is still a divergence of opinion as to the relative merits of hypothermia and the artificial heart. The artificial heart-lung is now being used successfully at the Mayo Clinic by Kirklin and his colleagues, and Cleland and Melrose, in London, have successfully used one of British design at Hammersmith Hospital. Brock is successfully doing open cardiac surgery with hypothermia, the main feature of this method being the extra corporeal cooling of the blood in a special refrigerator. The advantage of this method is that it need not be started until the heart has been inspected and a decision made as to whether it is required.

In the past cardiac surgeons have been chiefly concerned with relieving obstructions. It would seem that, with the help of either the artificial heart-lung or hypothermia, they will also be dealing with other congenital deformities, e.g., auricular or ventricular septal defects, as routine operations.

This Bulletin is highly recommended to those wishing to obtain an up-to-date review of cardiac surgery and also a glimpse into the future in this rapidly developing field.

T. B. S.